

11-14-05

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44909 7590 08/09/2005

WOLF, BLOCK, SCHORR & SOLIS-COHEN LLP
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(Depositor's name)

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/936,806	09/17/2001	Amir Loshkove	088/02376	9502

TITLE OF INVENTION: VASCULAR SURGERY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400 \$400	\$0	\$1400 \$700	11/09/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
O'CONNOR, CARY E	3732	606-153000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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FENSTER + COMPANY

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BY-PASS, INC.

ORANGEBURG, NEW YORK

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 3

A check in the amount of the fee(s) is enclosed.
 Payment by credit card, Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3419 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Allan C. Entis

Date November 9, 2005

Typed or printed name Allan C. Entis

Registration No. Reg. No. 52,866

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